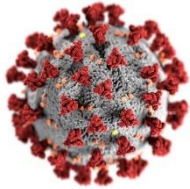


Dental Director Covid-19 Update

25th July 2020

Dear Colleagues,

As a Health Board we continue to see a decrease in admissions of C-19 positive/suspected positive cases. As of the end of last week there were 2 positives and 5 suspected positives in our acute hospitals.



There also continues to be a cautious reactivation of services and visiting has now been enabled at our hospitals; this is through a 'pre-booking' arrangement. We still, however, need to demonstrate **vigilance** especially around social distancing both inside and outside of work. We heard recently of a Practice in another Health Board having to **close for 14 days** due to TTP requirements.

Recent changes very short notice changes to quarantine arrangements in respect to Spain highlights the speed of change around C-19 that can take place. Health care workers are not exempt to these isolation requirements since holidays are not considered 'essential travel'. Workforce planning needs to obviously keep this in mind.

You may also be aware that our **CEO** has indicated her intention to retire at the end of the year. Her leadership and style will be missed; personally I have learned a huge amount from her and she has always been supportive and appreciative of the dental 'family'.

PPE Supply and Readiness

Non-AGP PPE continues to be available for NHS GDS through the Health Board's links with NWSSP. Welsh Government has indicated that **AGP PPE** will also be supplied through this route, It is likely that the pathway within SBUHB will be as for non-AGP PPE. However, we are yet to be informed of the details.

There is also a need to be aware that AGP PPE, in line with current supplies of non AGP PPE, will be a '**top-up**' of that used in NHS GDS care. As such, Practices should ensure that they have **sustainable sources of PPE** through their normal suppliers and then submit the numbers for items used in NHS activity, as now, to the Health Board and supplies will be replenished.

We are aware that most Practices have already obtained their own initial stocks of AGP PPE; this is both sensible and essential if the expectations of Welsh Government are to be met and maintained. The Health Board will not be in a position to provide initial stocks of PPE for individual Practices to commence AGPs by mid-August. There

is also no guarantee that NWSSP supplies will be comprehensive or sustainable going forward.

Reusable PPE

Although everyone recognises that single use PPE may be the preferred option, there is a need to be sensitive to individual circumstances as well as predictability of supply



chains. For example, there have been occasions where individuals have failed single use FFP3s fit testing but were successful with reusable items. As now each practitioner will need to risk assess any equipment they utilise but Health Boards have received guidance on this issue from Welsh Government through the Clinical Leads Group.

Reusable PPE can be utilised if individuals feel it is appropriate and this includes FFP3 masks, visors and gowns. However, it is essential that only items designed and specified as 'reusable' are used in this way and the manufacturers recommendations on decontamination are followed completely; this includes

the number of times an item can be used.

The Health Board would expect that **a log** be kept which describes the manufacturer's recommendations, the decontamination process used and records the use and decontamination of individual items; this includes filters and their replacements. There is also a need to be able to track individual items so, for example, visors masks and gowns should be individually identifiable. **Reusable gowns** can be laundered on the Practice premises providing the procedure fulfils the decontamination guidance related to C-19 and follows the manufacturer's recommendations, including the number of times this can be carried out safely.

The preferred **reusable FFP3** masks appears to be those with filters that can be autoclaved and do not have material strapping. Visors will still be necessary with reusable FFP3 masks. No additional mask should be used over a reusable FFP3 if it risks interfering with the filters or the exhalation valves.

The **DPAs will advise** specifically on these issues when they visit Practices in coming weeks.

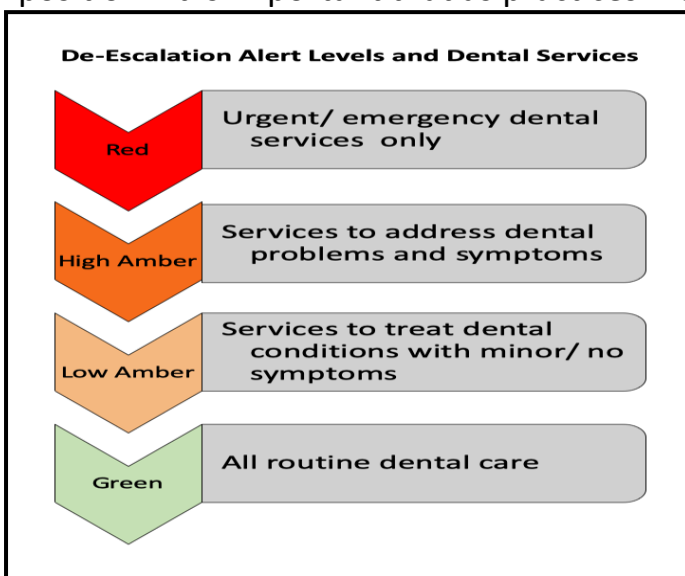
Test, Track and Protect (TTP)

TTP is now established and has significant potential implications for sustainability of our services. Currently it is anticipated that up to 25% of our workforce could be in isolation due to TTP. Guidance on the implications of **wearing PPE** when in contact with a positive case or actually being the positive case from the perspective of TTP has been shared. There is continued need to reinforce the importance to all team members to wear appropriate PPE in the workplace whilst at the same time practicing social distancing. We will all need to follow the Welsh Government guidance if contacted by the NHS Wales Test, Trace, Protect Service (<https://gov.wales/test-trace-protectcoronavirus>).

Service Reactivation

Reactivation of services across the Health Board continues to roll out but is still following a **cautious approach**. We had agreement recently for the CDS to start to look at re-establishing some core services. Hospital out-patient services have also started to look at expanding including OMFS, Orthodontics and Restorative Dentistry. However, in all cases, reactivation is still limiting services to the most urgent cases due to footfall, social distancing and PPE requirements.

Currently, from a dental perspective, we remain at 'Amber Alert'. This allows practices to focus on their urgent cases but, when ready, move to a 'Low Amber' position. It is important that as practices move to 'Low Amber' they are still in a



position from a PPE and access perspective to support urgent care. This is a key expectation from Welsh Government and the Health Board.

There is concern that C-19, if it acts like many in this family of viruses, could 'thrive' in colder weather and as such there is a risk we may see an increase in cases again in the Autumn and Winter especially as 'lockdown' eases. This could also coincide with the 'flu season' which could place added

pressures on the NHS and the wider workforce. In light of this, Welsh Government has expanded its Flu Vaccination Programme and I would encourage all teams to obtain the **seasonal flu vaccine** as soon as it becomes available.

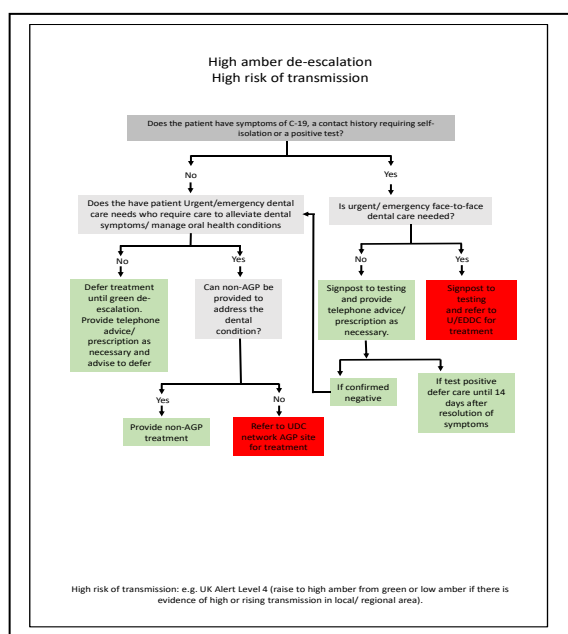
Welsh Government Expectations and Offer

We have had an excellent response to the request for an update on the status of practices to re-establish NHS services, including AGPs by mid-August. The **DPAs will be contacting** those practices who have indicated that they may not be able to make the date specified by the CDO.

The CDO recently provided a further **“FAQ”**:

(https://dental.walesdeanery.org/sites/default/files/2020-07-24_-_restoration_of_dental_services-amber_phase-faqs_final_pdf.pdf).

I understand that since 1st July there have been approximately 14,500 treatment claims submitted in Wales, accompanied by around 10,500 ACORNs. So whilst this is reassuring progress, there is still a shortfall in ACORNs completed.



It is an expectation during the Amber Phase that ACORNs are completed for all patients including urgent cases. The PCT will be contacting those practices who have recorded **low ACORNs** to date to support with any issues. We can see from the activity reports that some Practices are seeing a good number of patients but this is not the case for everyone and we will need to understand why this is the position.

There is also some work being undertaken by Welsh Government on how **workforce** could be recorded, possibly through COMPASS as well as recognising the amount of telephone/video triaging that is being provided.

It was pleasing to hear from Welsh Government last week that the dental services and Teams in SBUHB were **leading in their response** to de-escalation. **Please pass on our thanks to your Teams.**

UDC Network Practices

Four practices were successful in their bids to become Network Practices and are established and functional. The **criteria for acceptance** into the Network remains as that for the UDC Unit in PTRC: referrals are triaged by the RMC and then redirected to the UDC Practices if appropriate. Referrals **cannot be accepted** if Practices have informed us that they are providing AGPs, if a face-to-face assessment has not been undertaken by the referring clinician, if the case does not appear to require AGP care or if it is non-urgent.

Urgent Dental Care Unit and Referral Management Centre

These services continue to be a huge asset to us all and we are extremely grateful to the individuals who have been involved in their development and running. Over the last few weeks there **has been a doubling** of referrals and patients seen for care. We anticipate that as provision of AGP becomes more widely established in the GDS then the workload in the UDCU will reduce and allow the DTU, CDS and Restorative Dentistry services based in PTRC to start to reactivate more of their core services.

Resources

The **Orthodontic SOP** for reactivation of specialist services has been agreed by the All-Wales Leads Group and is currently with Welsh Government. Hopefully this will be published soon and we are grateful to Charlotte Eckhart for her leadership on this project.

We are still waiting for the SDCEP guidance on **'fallow time'** and it is anticipated that this will become available over the next 5-10 days. However, I would encourage colleagues not to anticipate significant changes at this time or delay plans based on possible expectations.

It is important that Teams keep up to date on any changes in guidance and the following links may be helpful:

- Welsh Government: <https://gov.wales/dental-health-services-coronavirus;>
- Health Education and Improvement Wales: [https://heiw.nhs.wales/covid-19/;](https://heiw.nhs.wales/covid-19/)
- NHS Wales Dental Referral Management System: [https://www.dentalreferrals.nhs.wales/dentists/covid/;](https://www.dentalreferrals.nhs.wales/dentists/covid/)
- Public Health Wales: <https://phw.nhs.wales/topics/latest-information-on-novelcoronavirus-covid-19/>
- British Orthodontic Society Covid-19 Advice. <https://www.bos.org.uk/COVID19-BOS-Advice/COVID19-BOS-Advice>
- Recently the HSE published guidance on establishing a "Covid-19 safe environment" (<https://www.hse.gov.uk/news/assets/docs/working-safely-guide.pdf>).

Practice Information

It is important that GDS Practices continue to return **accurate information** through FDS. The Health Board also needs to be **aware immediately** if circumstances change, particularly in relation to the expectations around the mid-August timeline described by Welsh Government.

Vicarious Liability

Although not related to C-19, I have been made aware of vicarious liability claims being made recently to Providers for the action of previous associates. It may be wise, if Providers are concerned, exploring the need for such cover with current indemnifiers or speaking with the LDC.

Although we appear to be starting to return to some sort of normality, it does appear that we may need to work with C-19 for some time. If anything this phase of the pandemic maybe even more challenging as we try to establish 'normal' services in a C-19 environment. It continues to be a demanding time for our Teams, families and the communities in which we work and live. The Health Board will provide advice and support whenever it can and appreciates the huge effort everyone has made during the past few months. However, we still need to be vigilant, cautious and keep ourselves, and those around us, safe.



Karl Bishop MScD FDSRCS(Eng) LLM PGCME PGCPP
Dental Director, Consultant in Restorative Dentistry